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15w/16478
PTO/SB/21 (6-99)

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02-09-05

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/015,388
		Filing Date	DECEMBER 12, 2001
		First Named Inventor	KEVIN P. BAKER
		Group/Art Unit	1647
		Examiner Name	TURNER, SHARON L.
Total Number of Pages in This Submission	117	Attorney Docket Number	39780-2830 P1C44

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> FEE TRANSMITTAL FORM <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Copy of an Assignment <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> ADDITIONAL ENCLOSURE(S) (PLEASE IDENTIFY BELOW): <input checked="" type="checkbox"/> DECLARATIONS OF AUDREY D. GODDARD; AVI ASHKENAZI; and STAMPED RETURN POSTCARD
<input checked="" type="checkbox"/> AMENDMENT / RESPONSE <input type="checkbox"/> After Final <input type="checkbox"/> Version With Markings Showing Changes <input type="checkbox"/> Affidavits/declaration(s)		
<input checked="" type="checkbox"/> EXTENSION OF TIME REQUEST (1 MONTH)		
<input checked="" type="checkbox"/> INFORMATION DISCLOSURE STATEMENT WITH PTO-1449 (4 REFERENCES)		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Copy of Notice		

AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 08-1641 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. 39780-2830 P1C44.

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name HELLER EHRLMAN WHITE & McAULIFFE LLP ANNA L. BARRY (Reg. No. 51,436)
 275 Middlefield Road, Menlo Park, California 94025 Telephone: (650) 324-7000 Facsimile: (650) 324-0638

Signature

Date FEBRUARY 7, 2005 Customer Number: 35489

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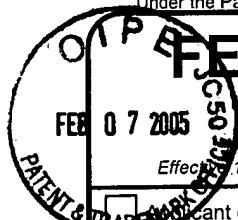
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FEES TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Small entity claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 300.00)

Complete if Known	
Application Number	10/015,388
Filing Date	DECEMBER 12, 2001
First Named Inventor	KEVIN P. BAKER
Examiner Name	TURNER, SHARON L.
Art Unit	1647
Attorney Docket No.	39780-2830 P1C44

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:Deposit Account Number
Deposit Account Name

08-1641 (39780-2830 P1C44)

HELLER EHRMAN WHITE & McAULIFFE LLP

The Director is authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 300	2001 150	Utility filing fee	
1002 200	2002 100	Design filing fee	
1003 200	2003 100	Plant filing fee	
1004 300	2004 150	Reissue filing fee	
1005 200	2005 100	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	=
Multiple Dependent	- 3** =	X	=

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	Fee Description
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple dependent claim, if not paid
1204 200	2204 100	** Reissue independent claims over original patent
1205 50	2205 25	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 120	2251 60	Extension for reply within first month	120.00
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 500	2452 250	Petition to revive - unavoidable	
1453 1,500	2453 750	Petition to revive - unintentional	
1501 1,400	2501 700	Utility issue fee (or reissue)	
1502 800	2502 400	Design issue fee	
1503 1,100	2503 550	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	180.00
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 300.00)

SUBMITTED BY

Name (Print/Type)	ANNA L BARRY	Registration No. (Attorney/Agent)	51,436	Telephone (650) 324-7000
Signature		Date	FEBRUARY 7, 2005	

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